## ISSUE SLIP STAPLE AREA (for additional cross references)

POS!TICT	INITIALS	ID NO.	DATE
		<u> </u>	
FEE DETERMINATION			
O.i.P.E. CLASSIFIER		14/	3/8
FORMALITY REVIEW	EW:	949	3/17/01
RESPONSE FORMALITY REVIEW			

## **INDEX OF CLAIMS**

V	Rejected	N	Non-elected
	Allowed	- 1	Interference
_	(Through numeral) Canceled	Α	Appeal
	`	0	Objected

nestricted 0							
Claim 9	Date	Claim Date	Claim Date				
1 4 6		<u>a</u>	<u>a</u>				
Final Original		Final	Final				
Final Origin		it 8					
170		51	101				
34		52	102				
3		53	103				
4		54	104				
5		55	105				
6		56	106				
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13	<del></del>	<del></del>	113				
14	<del></del>	64 65	114				
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15	<del></del>	67	117				
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	<del></del>	70					
21	<del></del>	71	121				
22		72 73	123				
23		74	124				
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25 26		76	126				
27		777	127				
28	<del></del>	78	128				
29	<del>                                     </del>	79	129				
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31	<del></del>	81	131				
32	<del>-                                     </del>	82	132				
33		83	133				
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35		85	135				
36		86	136				
37		87	137				
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39	<del>                                      </del>	89	139				
40		90	140				
41		91	141				
42	<del>                                     </del>	92	142				
43		93	143				
44		94	144				
45		95	145				
46		96	146				
47		97	147				
48		98	148				
49		99	149				
50		100	150				

If more than 150 claims or 10 actions staple additional sheet here

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